

RESPECT

Counseling Protocol for Rapid Testing



About Using the Provider Cards

The RESPECT session follows a structured protocol that guides the provider to conduct a personalized risk assessment, facilitate a discussion about client's risk situations, and encourage and assist clients to develop a realistic risk reduction step.

The basic structure of the provider cards needs to be practiced and followed to ensure the same degree of success that was demonstrated in the research. This tool is intended as a guide to help you follow the stages and steps of the intervention. Sample dialog is provided and you are encouraged to find your own words that are appropriate for your testing clients.

Use the RESPECT provider cards along with your client-centered counseling skills and techniques to focus on the client's specific behaviors that put them at risk for HIV. This is not an educational model, only give information to address gaps in knowledge or correct misunderstandings.

Using these provider cards to personalize risk for clients helps ensure an increased self-perception of risk and creates teachable moments to increase motivation to change. This is the major strength of the RESPECT model.

PRE-RESULT SESSION		
PROTOCOL STAGES	TIME (In Minutes)	PAGE
1. Introduce and Orient Client to the Session	3-4	5
<i>The Rapid Test sample is taken, and test is started after the process is explained to the client and consent is acquired.</i>		
2. Enhance the Client's Sense of Self-Risk	2-3	8
3. Explore the Specifics of the Most Recent Risk Incident	2-3	11
4. Review Previous Risk Reduction Experiences	3-4	13
5. Summarize the Risk Incident and Risk Patterns	2-4	15
6. Negotiate a Risk Reduction Step	4-5	18
7. Identify Sources of Support and Provide Referrals	1-2	20
Total Time	17-25	

POST-RESULT SESSION-NEGATIVE

PROTOCOL STAGES	TIME (In Minutes)	PAGE
A. Deliver Test Result	2-3	22
B. Review the Risk Reduction Step	4-5	24
C. Revise the Risk Reduction Step	4-5	26
D. Identify Sources of Support for Risk Reduction Step	1-2	28
E. Provide Referrals as Necessary	1-2	30
F. Close the Session	1-2	32
Total Time	13-19	

POST-RESULT SESSION-POSITIVE

PROTOCOL STAGES	TIME (In Minutes)	PAGE
A. Deliver Test Result	2-10	34
B. Review the Risk Reduction Step	4-5	36
C. Revise the Risk Reduction Step	4-5	38
D. Identify Sources of Support for Risk Reduction Step	1-2	40
E. Provide Referrals as necessary	1-2	42
F. Close the Session	1-2	44
Total Time	13-26	

Stage 1: Introduce and Orient Client to the Session

3-4 Minutes

1. Introduce yourself and explain your role as a counselor

- *Hello, my name is [name]. I am going to be talking with you about your risk for acquiring HIV or contracting an STD and some of the concerns that you might have about that.*
- *My role as a counselor is to administer and interpret the RAPID HIV test and to help you explore those risks and look at ways that you might be able to do things differently to protect yourself and others.*
- *We use Rapid HIV testing which will give you a result in about 10-20 minutes. Would you like to continue? (Keep in mind consent may have already been given)*
- *I also wanted to let you know that I will be using these cards (Provider Cards) to help me remember to address all the important issues.*

2. Describe the session

(Briefly cover the following points. They will be explored in more detail through-out the session)

a. Indicate duration of the session

- *We will have about ___minutes to talk together. Everything we say here will be completely confidential.*

b. Explore HIV (and STD) risks

- *We will talk about your risks and concerns for acquiring HIV (and/or contracting STDs).*

(continued)

Stage 1: Introduce and Orient Client to the Session (cont.)

c. Identify challenges to risk reduction

- *We will look at how you have tried to reduce your risk in the past.*

d. Discuss strategies to reduce risk

- *We will talk about changes you could make to further reduce your risk and develop a plan for doing this.*

e. Introduce and explain the Rapid Test (follow your clinic protocols and guidelines for describing the rapid test process and possible results)

- *We will stop briefly to conduct the Rapid HIV test. You will have a result in 20 minutes or less. There are three possible results.*
- **Non-Reactive (Negative)**, which means that HIV antibodies were not detected, and we will talk about the possible need for future testing.
- **Reactive (Preliminary Positive)**, which means you are highly likely to be infected with HIV and we will need to run a confirmatory test. We would then talk about your next steps to take care of yourself and what you would do differently to avoid becoming infected with other STDs and to avoid exposing anyone else to HIV.
- *Rarely the result is **Invalid**, which means a result could not be interpreted. This can be caused by a problem with the individual test kit or with the sample collection. We would need to repeat the test with a new kit to provide you with an accurate result. We have measures in place to assure the tests are accurate and invalid results are rare.*

(continued)

Stage 1: Introduce and Orient Client to the Session (cont.)

3. Address immediate questions

(Follow clinic protocol regarding consent and document if more than verbal consent is required)

- *Before we go any further, what concerns or questions do you have?*
- *If we identify issues we **cannot** address today, **I will offer referrals that might help you with these issues.***
- *Are you ready to get tested?*

Stage 2: Enhance the Client's Sense of Self-Risk

2-3 Minutes

1. Assess client's presenting issues

- *What brought you in today (for your test)?*
- *Can you tell me about what you think might be putting you at risk for HIV and other STDs?*

2. Listen for and identify behaviors that put client at risk

- *What do you think may have put you at risk for acquiring HIV or an STD?*
- *How do you define being careful? Safe?*

If client reports injection drug use, you may ask:

- *What does injecting safely mean to you?*
- *Can you tell me step-by-step what you do?*

3. Assess the client's level of concern about having or acquiring HIV (or STDs)

- *Which behaviors concern you the most?*
- *So, do you know that the same things that put you at risk for HIV can also put you at risk for STDs and Hepatitis?*
- *You say you are not concerned yet you are here to get a test, can you help me understand that?*

(continued)

Stage 2: Enhance the Client's Sense of Self-Risk

4. Discuss the client's HIV/STD test history and behavior changes in response to results

- *When was the last time you tested for [HIV/STD]?*
- *What was that experience like for you?*
- *How did the counseling or test results affect how you feel about the possibility of acquiring HIV or an STD?*

5. Assess whether the client is engaging in risk behavior because of previous results

- *When you were tested for _____, how did the counseling change your behavior?*
- *What have you done to keep from acquiring [HIV/STD] since the test?*

6. Direct the client's attention toward risk behavior

- *From what you have said about your behavior, you could be at some real risk for acquiring HIV [if appropriate].*
- *Some of the things you have told me about your risk behaviors put you at risk for acquiring HIV. That concerns me.*

(continued)

Stage 2: Enhance the Client's Sense of Self-Risk

7. Discuss examples of conflicts between the client's beliefs and behavior or examples of mixed feelings about risk reduction

- *We know that there is no cure for HIV so far and people respond differently to HIV treatment. I am wondering how would having HIV change your life?*
- **[If applicable]** *You have said how bad acquiring HIV would be, yet you continue to put yourself at risk with people whose status you don't know. Can you help me understand that?*

Stage 3: Explore the Specifics of the Most Recent Risk Incident

2-3 Minutes

1. Identify context that contributed to the incident

- *Tell me a little bit about the last time you put yourself at risk for acquiring HIV or getting STDs.*
- *Can you tell me what led up to having sex (or shooting drugs)?*

a. Who, what, where, when, and how

- *Was that with someone you knew well?*
- *Where did you go to have sex (or inject)?*
- *Was it about where you were or who you were with that allowed you to take this risk?*

b. Vulnerabilities and triggers

- *What kept you from protecting yourself and your partner?*
- *How does drinking alcohol or using other drugs influence your decision to have sex or to have sex without a condom (or share needles)?*
- *What else is going on in your life that might be leading you to take risks?*
- *When you think of all the situations when you have had unprotected sex (shared needles) in the last three months or so, what was going on that made you take a risk? Was there anything common in all those situations?*

(continued)

Stage 3: Explore the Specifics of the Most Recent Risk Incident

2. Assess the level of risk acceptable to the client

- *How comfortable were you with what happened?*
- *What concerns do you have about having sex (or sharing needles) with this person?*
- *What behaviors do you draw the line at? Are too risky?*

3. Assess communication about HIV with partner(s)

- *What did you and your partner talk about in terms of HIV risk or about being safe?*
- *How did you make that decision (to have sex or shoot drugs)?*

4. Be aware of contradictions that can be addressed to create dissonance

- *If you knew beforehand that your partner had HIV, would you have had unprotected sex (shared needles) with him or her?*
- *Would knowing have made a difference?*
- *It sounds like not getting HIV is really important to you and something you have a lot of concern about, and yet you are putting yourself in situations where you are at risk. Can you help me understand that a little more?*

Stage 4: Review Previous Risk Reduction Experiences

3-4 Minutes

1. Assess the patterns of risk behavior (e.g., happening regularly, occasionally, an unusual incident)

- *How often do you have sex (share needles) with a partner?*
- *Did you have sex (or share needles) more than once with any of those partners, like with a boyfriend or regular partner?*
- *How often did you practice safer sex (or inject safely)?*

2. Identify successful attempts at safer sex

- *What have you done to reduce your risk in the past?*
- *Tell me about a time when you chose to protect yourself and your partner by asking someone to use a condom or else not have sex?*
- *What made it work for you?*
- *It is great to hear you say that you have... **[describe Risk Reduction effort]**. That reduces your chance of getting an STD or acquiring HIV.*

3. Identify obstacles to risk reduction

- *What is the difference between the times you have used condoms (clean needle) and the times you have not used condoms (clean needle)?*

(continued)

Stage 4: Review Previous Risk Reduction Experiences

- *What gets in the way of protecting yourself and your partner?*
- *What has been the most difficult part of reducing your risk?*

4. Explore triggers and situations that increase the likelihood of high-risk behavior (if appropriate)

- *Tell me about the things that make it more challenging for you to protect yourself?*
- *What is the difference between the times you are safe and the times you are unsafe?*
- *How do alcohol and other drugs affect your decision to have unprotected sex?*
- *What is it about some partners that makes it more difficult to protect yourself?*
- *Were there times in your life (e.g., when you've felt depressed, been unemployed, or recently broken up with someone) when you felt it was more difficult to practice safer sex (or inject safely)?*

5. Explore the client's communication about risk with friends and partners

- *What do you and your friends talk about concerning [HIV/STD] risks?*
- *When you talked about HIV risk reduction with a sex partner, who brought up the topic?*
- *How did you feel about how it went?*
- *What was the outcome?*

Stage 4: Review Previous Risk Reduction Experiences

6. Discuss the client's level of acceptable risk

- *Are you comfortable with the risks you have taken?*
- **[If yes]** *This involves the risk of getting **[HIV/STD]**, and you say you feel comfortable with that? Can you help me understand that? **[Said non-judgmentally]***
- *What would you be comfortable doing to avoid HIV?*
- *What do you consider too risky?*

7. Be aware of contradictions that can be addressed to create dissonance

- *The activities you say you feel comfortable with put you at some risk for acquiring HIV, and you have said that you don't want to get HIV. How do you explain this?*
- *You said you are always safe, yet you have had two STDs in the past six months. How did you get them?*
- *You said you "just know" when someone is positive to avoid them. How can you be certain when you don't ask them about their status?*

Stage 5: Summarize the Risk Incident and Risk Patterns

2-4 Minutes

1. Provide feedback about the client's risk for acquiring HIV

- *It is great that you are thinking about what is risky.*
- *From what you have told me, there have been [quite a few, some, a couple of] risky situations that may have exposed you to HIV. It is really important that we work together to address this.*

2. Summarize the information

- *Here is how I understand your risks for acquiring HIV and getting STDs. First of all, you came in because [name reason for coming in. Retell the client's story as clearly as possible, making connections between issues and situations, and summarizing the key issues identified by the client].*
- *Does that sound right?*

3. Note the pattern of risk behavior

- *Let's talk about how often these risks happen. First, you have been able to protect yourself when [list circumstances that help the client reduce risk]. Is that right?*
- *However, when you [describe circumstance], you find yourself engaging in risky behaviors. It is important that we understand this.*

(continued)

Stage 5: Summarize the Risk Incident and Risk Patterns

4. Identify triggers

- *Several issues seem to affect your risk behavior: [list specific behavior, communication, or substance-use issues].*
- *Is this how you see your risk behavior?*
- *Does this make sense to you?*

5. Be aware of contradictions

- *You said that you would be less worried today if you had used condoms (or clean needles) more often in the past.*
- *How do you think you could make it happen?*

6. Convey concern and urgency about the client's risks (as appropriate)

- *You do not want to get HIV, and if you do not make some changes, you could be putting yourself at risk continually, and that really concerns me.*
- *I'm concerned the behaviors you describe are really putting you at risk for HIV.*

7. Encourage and support the client in addressing risk issues

- *Getting an HIV test and talking with me is a really great place to start because it shows you are taking care of yourself and doing something positive.*
- *Being willing to talk about this shows you care about yourself and others.*

Stage 6: Negotiate a Risk Reduction Step

4-5 Minutes

1. Prioritize Risk Reduction behavior

- *What do you think are the most important things to look at, or the most important circumstances to address to reduce your risk?*

2. Explore behavior(s) that the client will be most motivated to change

- *Realistically, what could you do to reduce your risk?*
- **[If the client selects a radical “always” or “never” approach]**
We know that change usually occurs in small steps. What would be the first step in reaching this goal?
- **[If the client is at a loss regarding how to reduce risk]** *I could suggest some options for reducing your risk: **[suggest some options]** but you are the only one who knows what will work for you.*

3. Identify a reasonable step toward changing the identified behavior

- *What step could you complete in the next week that would move you closer to reducing your risk?*

4. Divide the step into specific actions

- *You have identified something that you feel you can do. How are you going to make this happen?*

(continued)

Stage 6: Negotiate a Risk Reduction Step

- *What do you need to do first, second, third?*
- *When do you think you could do this?*

5. Ask the client to be aware of strengths and challenges in implementing the step

- *What might get in the way of doing this step?*
- *How could you plan for that challenge and work around it?*
- *What would be a good back-up step?*
- *How would you feel if you could complete this step?*
- *Changing behavior takes time and practice.*
- *You will really have done something good for yourself by trying out this step.*

6. Document the Risk Reduction step (get permission from client to give written documentation)

- *Let's write it down on this piece of paper so you will have a reference for when you leave today. Just a quick review, what is your step?*
- *We'll review this step after you get your results. You may think differently about your step depending on your result.*

Stage 7: Identify Sources of Support and Provide Referrals

1-2 Minutes

1. Assess the client's support system

- *Who in your life do you talk to about these things or who supports you?*
- *Is there someone who you feel you can talk with about your feelings and concerns?*
- *Who have you talked with about HIV risk already? How could they support you?*

2. Address the long-standing issues that contribute to risk

- *Your step sounds really good. We have identified some important bigger issues that lead to you taking risks, specifically [name issue].*
- *I can give you referrals to other services that might help with those issues.*

3. Assess the client's willingness to access referrals

- *Have you ever sought assistance for [name issue], such as counseling, a support group, or substance abuse treatment?*
- *How interested would you be in a referral to help you deal with this issue?*

(continued)

Stage 7: Identify Sources of Support and Provide Referrals

4. Evaluate the types of referral the client would accept

- *Would you be more comfortable in one-on-one counseling or in a group setting?*
- *Is there a particular type of support or service you would consider using?*

5. Provide appropriate referrals

- *Here is the name and phone number of the service you could call to get assistance.*
- *You can ask for _____ and tell him or her that I suggested you see _____.*
- **[If you have time and the referral service is open, offer to make the phone call for the client and set up an appointment now.]**

6. Transition (remind client of possible results and assess readiness to receive result)

- *We talked about a lot of things. Are you ready to get your results?*

Stage A: Deliver Test Results-NEGATIVE

2-3 Minutes

1. Assess whether client is ready to receive their test results. Deliver result in a clear calm manner

- *Are you ready to hear your test results?*
- *If you are ready, I will give you your result now.*

[Follow clinic protocols for giving results & transition to appropriate Post-Result Session Protocol]

- *Your result is **non-reactive (negative)**, which means no HIV antibodies were detected at this time.*

2. Allow client a moment to process the result as necessary

[Allow silence or other reaction.]

3. Check for understanding of result including window period and address any immediate reaction or questions.

- *Based on what you discussed as your most recent risk, you may need to retest in 3 months from your last risk.*
- *As we discussed earlier, you will need to test again since your most recent risk was less than 3 months ago.*
- *Remember the recommendation is 3 months from the date of last risk; your most recent risk may not be covered by this test.*

(continued)

Stage A: Deliver Test Results-NEGATIVE

4. Explicitly identify how a negative result affects the client's perception of risk

- *We discussed some of the things that concerned you about your risk for becoming infected with HIV. How do you feel about that now?*
- *As we discussed earlier some of the things you have been doing put you at high risk for getting HIV. Now that you have heard you are negative, how do you feel about them?*

Stage B: Review the Risk Reduction Step-NEGATIVE

4-5 Minutes

1. Assess the client's commitment to the step developed pre-result

(Remember to use any teachable moments and issues that concerned the client to keep awareness and focus on risky behaviors.)

- *Earlier we discussed some of your risks for [HIV/STD] (list risks).*
- *We came up with a Risk Reduction step for you to try after you leave here today. How do you feel about your step now that you have a negative result?*
- *Now that you have your result, how do you see your step and plan changing if at all?*
- *Remember earlier you were very concerned about some of the things you were doing that put you at high risk for getting HIV.*
- *Earlier we discussed how having an STD put you at higher risk for HIV and you were very concerned that you were exposing yourself.*

2. Provide encouragement and support for client's Risk Reduction step and plan (as appropriate)

- *Sounds like you are committed to protecting yourself and others in the future.*

(continued)

Stage B: Review the Risk Reduction Step-NEGATIVE

- *I am impressed with how you plan to handle that.*
- *You have really accomplished something for yourself by developing your plan.*

3. Identify strengths and barriers to the Risk Reduction step

- *How do you think it will feel when you take this step to reduce your risk?*
- *What parts of the step will be easiest?*
- *Which parts of the step might be challenging?*
- *What might stop you?*
- *What thoughts or feelings might support or challenge you?*
- *What would make it easier for you?*

4. Problem-solve issues concerning the step (if relevant)

- *How can we address the problems you might have with reducing your risk?*
- *What would help you get this done?*
- **[Offer options if client is at a loss. Be careful not to be directive]**
- *Some of my previous clients have tried _____, how do you think that might work for you?*

Stage C: Revise the Risk Reduction Step-NEGATIVE

4-5 Minutes

1. Develop a new or more challenging step with the client

(If necessary remind client of issues and concerns from the pre-result session)

- *You did an excellent job with developing this first Risk Reduction step. What else could you try to further reduce your risk of acquiring HIV? How do you feel about trying your step?*
- *Earlier you were very concerned about how the things you were doing put you at risk for HIV; this negative result doesn't mean those things are not risky.*
- *I am concerned that the things we talked about earlier that put you at risk will happen again.*
- *Remember that risk reduction and behavior change are best done in small, achievable steps. What do you need to do next to reduce your risk?*

2. Identify actions to achieve the step

- *Let us look at the issues that need to be addressed to reduce your risk and complete your new plan. [List issues] What do you need to do first, second, third?*
- *Try to think about how to improve or modify the step so it works better for you.*

(continued)

Stage C: Revise the Risk Reduction Step-NEGATIVE

3. Identify strengths and barriers

- *What do you think will allow you to make this step work for you?*
- *What might make it hard to do this step?*
- *When you try this step, think about what feels good and works for you, and which parts are hard or uncomfortable.*

4. Document the revised Risk Reduction step

- *Just as before, we will write your step on this piece of paper, and we will include all the actions needed to complete it. [Write out actions.]*
- *Sometimes just looking at the paper can help you remember the step and help you see yourself completing the step.*

Stage D: Identify Sources of Support-NEGATIVE

1-2 Minutes

1. Does the client have a support system?

- *As we discussed earlier it may be useful to share your step with someone who can support you in your efforts to reduce your risk. Who could you trust to tell about your visit here and talk with you about this step?*
- *Who knows you came for a test?*
- *It sounds like your (sibling, cousin, friend...) will be a good person to help you with this.*
- *Is there anyone else you would want to share this with and get support from? Someone who will help keep you on track?*

2. Discuss how client will go about discussing this with the people they have identified. Problem solve

- *How will you go about talking to [name]?*
- *What do you think might be difficult about talking to this person?*
- *If you have talked to them in the past about difficult things, what could you do next time to make sure you are able to talk to him or her about this?*
- *How do you feel about talking to [name] about your plan now?*
- *What will you say to [name]?*

(continued)

Stage D: Identify Sources of Support-NEGATIVE

3. [If client doesn't identify someone] Help identify a person to whom the client could comfortably disclose the step

- *Who in your life is supportive of you?*
- *Could you talk with him or her about the step?*
- *Who do you usually talk with about challenges you are facing?*
- *Do you and your friends ever talk about concerns about HIV?
Could you talk with any of them about this step?*
- *Who knows you came for a test? Might they be someone to talk to?*

4. Establish a concrete, specific approach for the client to use in sharing the step with a friend or relative

(If necessary remind client of issues and concerns from the pre-result session)

- *So, you believe you could tell [name] about this step?*
- *It is important to tell [name] about your intentions concerning the step and then to report to them on how it went.*
- *When and how will you tell [name]?*
- *What will you say? Would you like to practice?*

Stage E: Provide Referral-NEGATIVE

1-2 Minutes

1. If a referral was provided in the pre-result session, follow-up on the client's opinion of the referral post-result

- *(If a referral was provided in the pre-result session) When we talked earlier, I gave you a referral to [name]. How do you feel about calling to make an appointment now? Is there something I can do to facilitate this referral?*
- *Would you like to call and make an appointment right now?*
- *What might be more useful now?*

2. Address the long-standing or hard-to-manage issues that contribute to risk (optional)

- *Your step seems really good, and you've discussed some important issues that contribute to your risk and may best be handled with the help or assistance of professionals. How do you feel about that?*
- *Since we've talked about how [drug use and/or alcohol] affects your risk, have you considered getting help in dealing with this?*
- *Would some professional help to deal with [drug use and/or alcohol, mental health] be useful in keeping you from putting yourself at risk?*

3. Assess the client's willingness to seek professional help and use a referral (optional; repeat from pre-result session)

- *Some of the issues we talked about today are beyond my expertise and what we can deal with in this short time. How do you feel about seeking some additional support with these?*

(continued)

Stage E: Provide Referral-NEGATIVE

- *What about seeking assistance (e.g., counseling or a support group, methadone treatment, Narcotics Anonymous)? Have you (re)considered this?*
- *How interested would you be in getting a referral for services to deal with the issue?*
- *What would be the hardest thing about seeking support for [name the issue]?*

4. Evaluate the types of referral the client would be most receptive to (optional)

- *Would you be more comfortable talking to an individual provider or going to a support group?*
- *Is there a particular type of support or service you would be willing to consider using?*
- *What has been helpful in the past that might help with the issues you are dealing with now?*

5. Provide appropriate referral (optional)

- *Here is the name and phone number of the agency you can call to get assistance with the issue we discussed.*
- *How comfortable do you feel doing this?*
- *What questions do you have?*
- *Would you like to use my phone to call right now?*

Stage F: Close the Session-NEGATIVE

1-2 Minutes

1. Review the follow-up schedule if appropriate

(If no follow-up is being scheduled, skip to “Closing” in section 3 below.)

- *It's important that you come back for another test in ____months.*
- *Remember we talked about the window period and this test does not put you completely in the clear from some of the risks we discussed.*
- *If you want we can schedule a follow-up session to discuss how it went with your step/plan?*

2. Help client to remember follow-up appointment

- *What would help you remember to keep this appointment?*
- *Where do you usually record appointments so that you can remember?*

3. Write down appointment

(Get permission from client to give written documentation)

- *Is [day, date, time] okay?*
- *I am going to write your appointment down on the back of the piece of paper you wrote your step/plan on so you will have it for easy reference. (May ask client to write down appointment and step.)*

(continued)

Stage F: Close the Session-NEGATIVE

- *Let me make sure that you know how to contact me should you need to change the appointment.*

Closing

- *Thank you for coming in to talk with me today. You have done a lot of hard work. And I think you have made a step that will really work for you.*

Stage A: Deliver Test Results-POSITIVE

2-10 Minutes

1. Assess whether client is ready to receive their test results

Deliver Preliminary Positive result in a clear and calm manner following your clinic protocols

- *Are you ready to hear your test results?*
- *If you are ready, I will give you your result now.*

[Follow clinic protocols for giving results and transition to appropriate Post-Result Session Protocol]

- *Your result is **reactive (preliminary positive)**. This means it is highly likely that you are infected with HIV.*

2. Allow client a moment to process the result as necessary

- *Allow silence or other reaction.*

3. Check for understanding of result and address any immediate reaction or questions. Provide follow-up testing options and schedule confirmatory test

- *The rapid test is highly accurate and can detect HIV antibodies within a fairly short period after infection. The preliminary positive result from the rapid test will need to be confirmed with another test, but the result is very likely to be positive also.*
- *We will take a confirmatory sample before you leave today and have your results in a few days.*

(continued)

Stage A: Deliver Test Results-POSITIVE

4. Follow client's lead and assess for emotional and medical needs

- *I realize hearing that you are very likely infected with HIV may be difficult. (Unless client reaction indicates otherwise)*
- *Before you leave today I would like to put you in touch with a linkage counselor who can help you with the process of accessing care.*
- *I can connect you with referrals for emotional support and can make an appointment for you if you like.*

5. Assess client's readiness to move on to Stage B

- *One of the ways I can help right now is to talk with you about the risk reduction plan you developed earlier.*
- *Many of the things we discussed are still important to think about.*
- *How do you feel about spending a few minutes reviewing what you planned and talking about how it may change now that you have a preliminary positive result?*

Stage B: Review the Risk Reduction Step-POSITIVE

4-5 Minutes

1. Assess the client's commitment to the step developed pre-result

Remember to use any teachable moments and issues that concerned the client to keep awareness and focus on risky behaviors.

- *Earlier we discussed some of your risks for [HIV/STD] [list risks].*
- *We came up with a Risk Reduction step for you to try after you leave here today. How do you feel about your step now that you have a preliminary positive result?*
- *Now that you have your result, how do you see your step and plan changing if at all?*
- *Who knows you came for a test today? Who is the first person you will see when you leave here? Is anyone waiting for you?*
- *Earlier we discussed how having an STD put you at higher risk for HIV and you were very concerned that you were exposing yourself. How do you feel about possibly exposing others to HIV?*

2. Provide encouragement and support for client's Risk Reduction step and plan (as appropriate)

- *Sounds like you are committed to protecting yourself and others in the future.*
- *I am impressed with how you plan to handle that.*
- *You have really accomplished something for yourself by developing your plan.*

(continued)

Stage B: Review the Risk Reduction Step-POSITIVE

3. Identify strengths and barriers to the Risk Reduction step

(Disclosure of HIV status may be an issue, and may need to be supported)

- *How do you think it will feel when you take this step to reduce the risk of getting an STD or transmitting HIV?*
- *What parts of the step will be easiest?*
- *Which parts of the step might be challenging?*
- *What might stop you? What might make it more difficult?*
- *What thoughts or feelings might support or challenge you?*
- *What would make it easier for you?*

4. Problem-solve issues concerning the step (if relevant)

- *How can we address the problems you might have with reducing your risk? What would help you get this done?*
- *It sounds like telling partners about your status may be difficult. We can talk more about how you could do it or how you can get help from someone else to do it.*

Stage C: Revise the Risk Reduction Step-POSITIVE

4-5 Minutes

1. Develop a new or more challenging step with the client

(If necessary remind client of issues and concerns from the pre-result session)

- *You did an excellent job with developing this first Risk Reduction step.*
- *What do you need to do differently to reduce your risk of transmitting HIV?*
- *I am concerned that the things we talked about earlier that put you and others at risk will happen again.*
- *Remember that risk reduction and behavior change are best done in small, achievable steps. What do you need to do next to reduce your risk?*

2. Identify actions to achieve the step

- *Let us look at the issues that need to be addressed to reduce your risk and complete your new plan. [List issues]*
- *What do you need to do first, second, third?*
- *Try to think about how to improve or modify the step so it works better for you.*
- *It sounds like disclosing your status is very scary for you. How could you protect your partners without disclosing your status? (just using a condom, only being a bottom)*

(continued)

Stage C: Revise the Risk Reduction Step-POSITIVE

3. Identify strengths and barriers to the Risk Reduction step

- *What do you think will allow you to make this step work for you?*
- *What might make it hard to do this step?*
- *How would it feel to tell your partner so they can share in the responsibility of protecting themselves from infection?*
- *What will you do if someone asks a specific question about testing or status?*
- *When you try this step, think about what feels good and works for you, and which parts are hard or uncomfortable.*

4. Document the revised Risk Reduction step

- *Just as before, we will write your step on a piece of paper, and we will include all the actions needed to complete it. [Write out actions.]*
- *Sometimes just looking at the paper can help you remember the step and help you see yourself completing it.*
- *You may want to be careful about where you keep your plan to assure no one sees it unless you show them.*

Stage D: Identify Sources of Support-POSITIVE

1-2 Minutes

1. Does the client have a support system?

(Disclosure of status may be a significant issue now.)

- *As we discussed earlier it may be useful to share your step with someone who can support you in your efforts to reduce your risk. Who could you trust to tell about your visit here and talk with about this step?*
- *Now that you have a preliminary positive result, what other support will you need? Are there different people who you are thinking about now?*
- *It sounds like your (sibling, cousin, friend...) will be a good person to help you with this.*
- *Is there anyone else you would want to share this with and get support from? Someone who will help you stick to your plan?*

2. Discuss how client will go about discussing this with the people they have identified. Problem solve

- *How will you go about talking to [name]?*
- *What do you think might be difficult about talking to this person?*
- *If you have talked to them in the past about difficult things, what could you do next time to make sure you are able to talk to him or her about this?*
- *How do you feel about talking to [name] about your plan now?*

(continued)

Stage D: Identify Sources of Support-POSITIVE

- *What will you say to [name]?*
- *What questions do you think [name] might have?*

3. [If client doesn't identify someone] Help identify a person to whom the client could comfortably disclose the step/your status

- *Who in your life is supportive of you?*
- *Could you talk with him or her about the step/your status?*
- *Who do you usually talk with about challenges you are facing?*
- *Do you and your friends ever talk about concerns about HIV?*
- *Who knows you came for a test? Might they be someone to talk to?*

4. Establish a concrete, specific approach for the client to use in sharing the step/status with a friend or relative

Offer to role-play talking with support person and give feedback

- *So, you believe you could tell [name] about this step/status?*
- *It's important to tell [name] about your intentions concerning the step and then to report back to them about how it went.*
- *When and how will you tell [name]?*
- *What will you say? Would you like to practice?*
- *What words will you use to disclose your status to [name]?*

Stage E: Provide Referral-POSITIVE

1-2 Minutes

1. If a referral was provided in the pre-result session, follow-up on the client's opinion of the referral post-result

- **(If a referral was provided in the pre-result session)** *When we talked earlier, I gave you a referral to [name]. How do you feel about calling to make an appointment now?*
- *What might be more useful now?*
- *May I have a linkage counselor talk to you before you leave today?*
- *What would help you when you leave here today?*
- *Is there anything else I can do to help you before you leave here today?*

2. Address the long-standing or hard-to-manage issues that contribute to risk (optional)

- *Your step seems really good, yet some important issues contribute to your risk that may best be handled with the help or assistance of professionals.*
- *Would some professional help to deal with [drug use and/or alcohol, mental health] be useful to help keep you from putting yourself and others at risk?*

3. Assess the client's willingness to seek professional help and use a referral (optional; repeat from Pre-result Session)

- *Some of the issues we talked about today are beyond my expertise and what we can deal with in this short time. How do you feel about seeking some additional support with these?*

(continued)

Stage E: Provide Referral-POSITIVE

- *What about seeking assistance (e.g., counseling or a support group, methadone treatment, Narcotics Anonymous)? Have you (re)considered this?*
- *How interested would you be in getting a referral for services to deal with the issue?*
- *What would be the hardest thing about seeking support for [name the issue]?*

4. Evaluate the types of referral the client would be most receptive to (optional)

- *Would you be more comfortable talking to an individual provider or going to a support group?*
- *Is there a particular type of support or service you would be willing to consider using?*
- *What has been helpful in the past that might help with the issues you are dealing with now?*

5. Provide appropriate referral (optional)

- *Here is the name and phone number of the agency you can call to get assistance with the issue we discussed.*
- *How comfortable do you feel doing this?*
- *What questions do you have?*
- *Would you like to use my phone to call right now?*

Stage F: Close the Session-POSITIVE

1-2 Minutes

1. Review the follow-up schedule if appropriate

If no follow-up is being scheduled, skip to “Closing” in section 3 below.

- *Your confirmatory test result will be ready ____, it is important that you come back for that.*
- *If you want we can schedule a follow-up session to discuss how it went with your step/plan. You can also discuss your step with your case manager or other service providers.*

2. Help client to remember follow-up appointment

- *What would help you remember to keep this appointment?*
- *Where do you usually record appointments so that you can remember?*
- *Many people use their phones to keep track of appointments. How do you keep track?*

3. Write down appointment

(Follow clinic protocols regarding paperwork and complete any required forms as directed by your supervisor.)

- *Is [day, date, time] okay?*
- *I am going to write your appointment down on the back of the piece of paper you wrote your step on so you will have it for easy reference. (May ask client to write down appointment and step.)*

(continued)

Stage F: Close the Session-POSITIVE

- *Let me make sure that you know how to contact me should you need to change the appointment.*

Closing

- *Thank you for coming in to talk with me today. You have done a lot of hard work.*
- *What will you do when you leave here and how will you take care of yourself?*

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